Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000196277 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : BROWARD SOHO SERVICES INC.

Account Number : I20100000080 Phone : (954) 366-3850

Fax Number

954-633-7850

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN

HIL O MATIC, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Fax: (954) 633-7850

To:

Fax: +1 (850) 617-6380

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COVER LETTER

TO:	Amendment Section			
	Division of Corporations			

NAME OF CORPORATION: HIL O MATIC, INC. DOCUMENT NUMBER: P14000008835

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARINELLA PORRAS

Name of Contact Person

HIL O MATIC, INC.

Firm/ Company

2906 NW 64TH AVE

MARGATE, FL 33063

City/ State and Zip Code

TAXRIGHT7@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARINELLA PORRAS

Name of Contact Person

at (954) 899-5232

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

To:

Fax: +1 (850) 617-6380

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Articles of Amendment to Articles of Incorporation

Name of Corporation as currently filed with	th the Florida Dept. of State)	
P14000008835		
(Document Number of Corpo	ration (if known)	
ursuant to the provisions of section 607,1006, Florida Statut s Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following	g amendment(s) to
. If amending name, enter the new name of the corporation	tiun:	
N/A		The new
ame must be distinguishable and contain the word "corp.," "Inc.," or Co.," or the designation "Corp,," "Inc., or Co.," or the designation "Corp,," "Inc., or chartered, "professional association," or the abbrev B. Enter new principal office address, if applicable; Principal office address MUST BE A STREET ADDRESS	c," or "Co". A professional corporation name must of viation "P.A." N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	· ·
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	fice address in Florida, enter the name of the address:	
Name of New Registered Agent N/A		14 PHC 20
	Clorida street addressj	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
	•	×.*
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am j		in and a second

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

To:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change	PT	John Doe		
X Remove	Y	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	me	<u>Addres</u> s
1) Change	VP	D.	ANIEL F IZAGUIRRE PORI	Calle 1ra. #199
Add				Alto Barinas Norte
Remove				Barinas, Estado Barinas, Ve
2) Change	S	G	RASIL H LEON BOCARAN	Calle 1ra. #199
✓ ∧dd				Alto Barinas Norte
Remove				Barinas, Estado Barinas, Ve
3) Change				
Add				
Remove				AND THE PROPERTY OF THE PARTY O
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		 -		
∆dd				
Remove			•	

E. If amending or adding additional Articl (Attach additional sheets, if necessary).			
ARTICLE IX - PERCENTAGE OF	OWNERSHIP:		
1) Marinella Porras	(33%)		
2) Daniel F Izaguirre Porras	(34%)		
3) Grasil H Leon Bocaranda	(33%)		
			<u>-</u>
			·
F. If an amendment provides for an excha	ange, reclassification, or	cancellation of issued sh	ares,
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not contained i	n the amendment itself;	
		·	

From: Amelia Basso

Fax: (954) 633-7850

To:

Fax: +1 (850) 617-6380 Page 6 of 6 08/20/2014 11:29

The date of each amendment(s) adoption: 08/19/2014	, if other than the
date this document was signed.	
Effective date if applicable: 08/19/2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s).	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 08/19/2014	
Signature Morrast.	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
MARINELLA PORRAS	
(Typed or printed name of person signing)	
PRESIDENT.	
(Title of person signing)	